| B1 (Official Form 1)(12/11) | | | | | | | |
|---|---|---|--|--|---|---|--------------------------------------|
| | States Bankı tern District o | | | | | | Voluntary Petition |
| Name of Debtor (if individual, enter Last, First, Middle): Hatton, Bobby Joe | | | | Name of Joint Debtor (Spouse) (Last, First, Middle): Hatton, Wanda June | | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | used by the Jo maiden, and t | | n the last 8 years : |
| Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) xxx-xx-8866 | ayer I.D. (ITIN) No./0 | Complete EIN | (if more | our digits o than one, state | all) | Individual-T | axpayer I.D. (ITIN) No./Complete EIN |
| Street Address of Debtor (No. and Street, City, a 773 West Bend Sims, AR | , | ZIP Code | 773 | Address of West Bons, AR | | (No. and Str | eet, City, and State): ZIP Code |
| County of Residence or of the Principal Place of Montgomery | | 71969 | | y of Reside | | Principal Pla | 71969 ce of Business: |
| Mailing Address of Debtor (if different from street PO Box 971 Mount Ida, AR | _ | ZIP Code | PO | g Address Box 971 unt Ida, | | or (if differen | at from street address): ZIP Code |
| Location of Principal Assets of Business Debtor (if different from street address above): | | 71957 | <u> </u> | | | | 71957 |
| Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: | (Check ☐ Health Care Bu ☐ Single Asset Re in 11 U.S.C. § ☐ Railroad ☐ Stockbroker ☐ Commodity Bre ☐ Clearing Bank ☐ Other ☐ Tax-Exe | eal Estate as de 101 (51B) bker mpt Entity , if applicable) empt organization | on s | defined "incurr | the P er 7 er 9 er 11 er 12 | Checkensumer debts, 101(8) as dual primarily | |
| Filing Fee (Check one box Full Filing Fee attached Filing Fee to be paid in installments (applicable to attach signed application for the court's consideratidebtor is unable to pay fee except in installments. Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration) | individuals only). Must ion certifying that the Rule 1006(b). See Offic 7 individuals only). Mu | ial | otor is a sr otor is not otor's aggr less than s applicable lan is bein eptances | a small busing regate nonco \$2,343,300 (e.e. boxes: ag filed with of the plan w | debtor as definingess debtor as definingent liquida amount subject this petition. | efined in 11 U ted debts (exc to adjustment | |
| Statistical/Administrative Information ☐ Debtor estimates that funds will be available ☐ Debtor estimates that, after any exempt prop there will be no funds available for distributi Estimated Number of Creditors | erty is excluded and ion to unsecured cred | nsecured credit administrative litors. | tors. | es paid, | | THIS | SPACE IS FOR COURT USE ONLY |
| 1- 50- 100- 200- 49 99 199 999 Estimated Assets □ □ ■ □ | 1,000- 5,001- 5,000 10,000 | 25,000 50 | 5,001- 0,000 | 50,001- 100,000 | OVER 100,000 | | |
| \$50,000 | \$1,000,001 \$10,000,001 to \$10 to \$50 million million | to \$100 to million mi | 00,000,001 \$500 illion 00,000,001 \$500 | to \$1 billion | \$1 billion | | |

6:12-bk-70080 Doc#: 1 Filed: 01/10/12 Entered: 01/10/12 16:57:05 Page 2 of 55

B1 (Official Form 1)(12/11) Page 2 Name of Debtor(s): Voluntary Petition Hatton, Bobby Joe Hatton, Wanda June (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Location Date Filed: Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) (Date) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ■ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(12/11) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Bobby Joe Hatton

Signature of Debtor Bobby Joe Hatton

X /s/ Wanda June Hatton

Signature of Joint Debtor Wanda June Hatton

Telephone Number (If not represented by attorney)

January 10, 2012

Date

Signature of Attorney*

X /s/ Marc Honey

Signature of Attorney for Debtor(s)

Marc Honey 86091

Printed Name of Attorney for Debtor(s)

Honey Law Firm, P. A.

Firm Name

PO Box 1254 Hot Springs, AR 71902

Address

(501) 321-1007 Fax: (501) 321-1255

Telephone Number

January 10, 2012

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

 \mathbf{X}

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Hatton, Bobby Joe Hatton, Wanda June

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

| v |
|---|
| Λ |

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| | _ | | | |
|---|----|---|---|--|
| ٩ | ٧ | v | • | |
| | ١, | 8 | | |

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Western District of Arkansas

| In re | Bobby Joe Hatton Wanda June Hatton | | Case No. | |
|-------|---------------------------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page 2 |
|---|---|
| • | nseling briefing because of: [Check the applicable |
| statement.] [Must be accompanied by a motion for de | etermination by the court.] |
| ☐ Incapacity. (Defined in 11 U.S.C. § | 109(h)(4) as impaired by reason of mental illness or |
| mental deficiency so as to be incapable of real | lizing and making rational decisions with respect to |
| financial responsibilities.); | |
| ☐ Disability. (Defined in 11 U.S.C. § | 109(h)(4) as physically impaired to the extent of being |
| • • | n a credit counseling briefing in person, by telephone, or |
| through the Internet.); | in worder to windowing criticing in person, of vereprious, or |
| ☐ Active military duty in a military co | ombat zone |
| in a minute y co | mout zone. |
| □ 5. The United States trustee or bankruptcy a | administrator has determined that the credit counseling |
| requirement of 11 U.S.C. § 109(h) does not apply in t | |
| | |
| I certify under penalty of perjury that the i | information provided above is true and correct. |
| Signature of Debtor: | /s/ Bobby Joe Hatton |
| Ç | Bobby Joe Hatton |
| Date: January 10, 201 | 2 |

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Western District of Arkansas

| In re | Bobby Joe Hatton Wanda June Hatton | | Case No. | |
|-------|---------------------------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page 2 | | | | | |
|---|--|--|--|--|--|--|
| statement.] [Must be accompanied by a motion for de ☐ Incapacity. (Defined in 11 U.S.C. § mental deficiency so as to be incapable of real financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 1 | 109(h)(4) as impaired by reason of mental illness or lizing and making rational decisions with respect to 109(h)(4) as physically impaired to the extent of being n a credit counseling briefing in person, by telephone, or | | | | | |
| ☐ 5. The United States trustee or bankruptcy a requirement of 11 U.S.C. § 109(h) does not apply in t | administrator has determined that the credit counseling his district. | | | | | |
| I certify under penalty of perjury that the information provided above is true and correct. | | | | | | |
| ~- - | /s/ Wanda June Hatton Wanda June Hatton | | | | | |
| Date: January 10, 2012 | 2 | | | | | |

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court Western District of Arkansas

| In re | Bobby Joe Hatton, | | Case No. | |
|-------|-------------------|---------|----------|---|
| | Wanda June Hatton | | | |
| _ | | Debtors | Chapter | 7 |
| | | | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 182,600.00 | | |
| B - Personal Property | Yes | 4 | 33,593.58 | | |
| C - Property Claimed as Exempt | Yes | 2 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 200,772.56 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 2 | | 2,660.22 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 5 | | 397,981.86 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | 4,969.99 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | 4,970.36 |
| Total Number of Sheets of ALL Schedu | ıles | 19 | | | |
| | To | otal Assets | 216,193.58 | | |
| | | 1 | Total Liabilities | 601,414.64 | |

Form 6 - Statistical Summary (12/07)

United States Bankruptcy Court Western District of Arkansas

| Bobby Joe Hatton, Wanda June Hatton | | Case No. | |
|---|---------------------------|-----------------------------|---------------------|
| - Wanda Galle Hatton | Debtors | Chapter | 7 |
| STATISTICAL SUMMARY OF CERTAIN | LIABILITIES A | ND RELATED DA | ГА (28 U.S.C. 8 159 |
| f you are an individual debtor whose debts are primarily consume case under chapter 7, 11 or 13, you must report all information re | er debts, as defined in § | | • |
| Check this box if you are an individual debtor whose debts report any information here. | | sumer debts. You are not re | quired to |
| This information is for statistical purposes only under 28 U.S. | C. § 159. | | |
| Summarize the following types of liabilities, as reported in the | | hem. | |
| Type of Liability | Amount | | |
| Domestic Support Obligations (from Schedule E) | | | |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | | | |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | | | |
| Student Loan Obligations (from Schedule F) | | | |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | | | |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | | | |
| TOTAL | | | |
| State the following: | | | |
| Average Income (from Schedule I, Line 16) | | | |
| Average Expenses (from Schedule J, Line 18) | | | |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | | | |
| State the following: | | | |
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | | |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | | | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | | |
| 4. Total from Schedule F | | | |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | | |

B6A (Official Form 6A) (12/07)

| In re | Bobby Joe Hatton, | Case No. |
|-------|-------------------|----------|
| | Wanda June Hatton | |

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |
|---|--|---|--|----------------------------|
| Residential home and 148.7 acres located at 773 West Bend Sims, AR 71969 | Tenancy by the Entiret | y J | 179,850.00 | 192,143.00 |
| 11.5 Acres located in Sims, AR 71969 | Tenancy by the Entiret | y J | 2,350.00 | 8,629.56 |
| 2 Acres located in Sims, AR 71957 | Tenancy by the Entiret | y J | 400.00 | 0.00 |

Sub-Total > **182,600.00** (Total of this page)

Total > **182,600.00**

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

| In re | Bobby Joe Hatton, | Case No. |
|-------|-------------------|----------|
| | Wanda June Hatton | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|---|---|---|
| 1. | Cash on hand | Cash on Hand | J | 20.00 |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, | Checking Account: 9503 located at Diamond Bank, P.O. Box 10, Glenwood, AR. 71943 | J | 4.26 |
| | thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | Checking Account: 7336 located at Union Bank of Mena, P.O. Box 898, Mena, AR. 71953 | J | 9.16 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | X | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | Household Goods & Furnishings | J | 2,000.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | |
| 6. | Wearing apparel. | Wearing Apparel | J | 200.00 |
| 7. | Furs and jewelry. | Jewelry | J | 100.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | 243 Calibur Remington Rifle | J | 50.00 |
| | and other hoody equipment. | 30-0-6 Remington Rifle | J | 50.00 |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Whole Life Insurance Policy with National Life | J | 43.72 |
| 10. | Annuities. Itemize and name each issuer. | X | | |

3 continuation sheets attached to the Schedule of Personal Property

2,477.14

Sub-Total >

(Total of this page)

| In re | Bobby Joe Hatton, |
|-------|-------------------|
| | Wanda June Hatton |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| _ | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--|---|---|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or | | Roth IRA with Modern Woodmen of America | W | 710.47 |
| | other pension or profit sharing plans. Give particulars. | | Roth IRA with Modern Woodmen of American | н | 710.47 |
| 13. | Stock and interests in incorporated | | 10 Shares of Metlife, Inc. Stock | J | 320.50 |
| | and unincorporated businesses. Itemize. | | Hatton Machining Center, Inc. | J | 0.00 |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| | | | | Sub-Tota | al > 1,741.44 |
| | | | (To | otal of this page) | - |

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

| In re | Bobby Joe Hatton, |
|-------|-------------------|
| | Wanda June Hattor |

| Case No. |
|----------|
|----------|

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|---|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | | 1/3 Ownership of United States Patent Number 6,635,024 | J | 0.00 |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | Х | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 1990 Chevrolet Truck-(180,000 miles), very poor condition | J | 2,100.00 |
| | | | 1997 Dodge Truck (188,200 Mileage)-Wrecked | J | 2,725.00 |
| | | | 1990 Chevrolet Truck (268,187 Mileage) **Does not run | J | 200.00 |
| | | | 1989 Chevrolet Blazer (285,000 Mileage) **Does not run | J | 200.00 |
| | | | 1995 Home made 20 foot trailer | J | 350.00 |
| | | | 1994 Cadillac Sedan DeVille (184,000 Mileage) **Does not run | J | 250.00 |
| 26. | Boats, motors, and accessories. | | 1989 Champion Boat & trailer **Does not run | J | 550.00 |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | | 36 Cows & 10 Calves located at 773 West Bend Sims, AR 71969 | J | 9,500.00 |

Sub-Total > 15,875.00 (Total of this page)

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

| In re | Bobby Joe Hatton, | |
|-------|-------------------|--|
| | Wanda June Hatton | |

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--------------------------------------|---|---|
| 32. Crops - growing or harvested. Give particulars. | х | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind | Tools for Mad | chine Shop | J | 500.00 |
| not already listed. Itemize. | Haase Mill | | J | 5,000.00 |
| | LTC20AP Lat | he | J | 2,000.00 |
| | Okuma Cade | t | J | 3,500.00 |
| | MCV-760AP | Mill | J | 1,500.00 |
| | Datsun Forkl | ift | J | 1,000.00 |

| Sub-Total > 13,500.00 | | (Total of this page) | Total > 33,593.58 | B6C (Official Form 6C) (4/10)

| In | re |
|----|----|
| | |

Bobby Joe Hatton, Wanda June Hatton

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

\$\text{146,450.} (Amount subject to adjustment on 4/1/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)}

■ 11 U.S.C. §522(b)(2)
□ 11 U.S.C. §522(b)(3)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|--|---|----------------------------------|---|
| Real Property 2 Acres located in Sims, AR 71957 | 11 U.S.C. § 522(d)(5) | 400.00 | 400.00 |
| <u>Cash on Hand</u> Cash on Hand | 11 U.S.C. § 522(d)(5) | 20.00 | 20.00 |
| Checking, Savings, or Other Financial Accounts, Checking Account: 9503 located at Diamond Bank, P.O. Box 10, Glenwood, AR. 71943 | Certificates of Deposit 11 U.S.C. § 522(d)(5) | 4.26 | 4.26 |
| Checking Account: 7336 located at Union Bank of Mena, P.O. Box 898, Mena, AR. 71953 | 11 U.S.C. § 522(d)(5) | 9.16 | 9.16 |
| Household Goods and Furnishings Household Goods & Furnishings | 11 U.S.C. § 522(d)(3) | 2,000.00 | 2,000.00 |
| Wearing Apparel Wearing Apparel | 11 U.S.C. § 522(d)(3) | 200.00 | 200.00 |
| <u>Furs and Jewelry</u> Jewelry | 11 U.S.C. § 522(d)(4) | 100.00 | 100.00 |
| <u>Firearms and Sports, Photographic and Other Hol</u> 243 Calibur Remington Rifle | bby Equipment 11 U.S.C. § 522(d)(5) | 50.00 | 50.00 |
| 30-0-6 Remington Rifle | 11 U.S.C. § 522(d)(5) | 50.00 | 50.00 |
| Interests in Insurance Policies Whole Life Insurance Policy with National Life | 11 U.S.C. § 522(d)(5) | 43.72 | 43.72 |
| Interests in IRA, ERISA, Keogh, or Other Pension Roth IRA with Modern Woodmen of America | or Profit Sharing Plans 11 U.S.C. Section 522(n) | 0.00 | 710.47 |
| Roth IRA with Modern Woodmen of American | 11 U.S.C. Section 522(n) | 0.00 | 710.47 |
| Stock and Interests in Businesses 10 Shares of Metlife, Inc. Stock | 11 U.S.C. § 522(d)(5) | 320.50 | 320.50 |
| Animals 36 Cows & 10 Calves located at 773 West Bend Sims, AR 71969 | 11 U.S.C. § 522(d)(5) | 9,500.00 | 9,500.00 |
| Other Personal Property of Any Kind Not Already Tools for Machine Shop | <u>Listed</u> 11 U.S.C. § 522(d)(5) | 500.00 | 500.00 |
| Haase Mill | 11 U.S.C. § 522(d)(5) | 5,000.00 | 5,000.00 |
| LTC20AP Lathe | 11 U.S.C. § 522(d)(5) | 2,000.00 | 2,000.00 |
| Okuma Cadet | 11 U.S.C. § 522(d)(5) | 3,500.00 | 3,500.00 |

¹ continuation sheets attached to Schedule of Property Claimed as Exempt

B6C (Official Form 6C) (4/10) -- Cont.

| In re | Bobby Joe Hatton, | Case No. |
|-------|-------------------|----------|
| | Wanda June Hatton | |

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

(Continuation Sheet)

| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
|-------------------------|---|----------------------------------|---|
| MCV-760AP Mill | 11 U.S.C. § 522(d)(5) | 1,500.00 | 1,500.00 |
| Datsun Forklift | 11 U.S.C. § 522(d)(5) | 1,000.00 | 1,000.00 |

Total: 26,197.64 27,618.58

B6D (Official Form 6D) (12/07)

| • | | |
|-------|-------------------|----------|
| In re | Bobby Joe Hatton, | Case No. |
| | Wanda June Hatton | |

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | A H | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGEN | 1 - QD - | S P | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY | |
|--|---|--------|--|-------------|-----------|--------|--|---------------------------------|--|
| Account No. xx9800 Diamond Bank P.O. Box 10 Glenwood, AR 71943 | | J | 05/26/2011 Other 11.5 Acres located in Sims, AR 71969 | T | D A T E D | | | | |
| Account No. xxxxxx8600 | + | - | Value \$ 2,350.00 04/19/2002 | - | | | 8,629.56 | 6,279.56 | |
| Farm Credit Services P.O. Box 1719 Russellville, AR 72811 | | J | Other Residential home and 148.7 acres located at 773 West Bend Sims, AR 71969 | | | | | | |
| | | | Value \$ 179,850.00 | L | | | 192,143.00 | 12,293.00 | |
| Account No. | | | Value \$ | | | | | | |
| Account No. | | | Value \$ | _ | | | | | |
| continuation sheets attached | | 1 | | Subt his | | | 200,772.56 | 18,572.56 | |
| | Total (Report on Summary of Schedules) 200,772.56 18,572.56 | | | | | | | | |

B6E (Official Form 6E) (4/10)

| • | | | |
|-------|-------------------|----------|--|
| In re | Bobby Joe Hatton, | Case No. | |
| | Wanda June Hatton | | |
| _ | | Debtors | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

"Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules. Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data. Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) ☐ Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). ☐ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). ☐ Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,775* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). ☐ Deposits by individuals Claims of individuals up to \$2,600* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). ☐ Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). ☐ Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or

another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/10) - Cont.

| In re | Bobby Joe Hatton, | | Case No. | |
|-------|-------------------|---------|----------|--|
| | Wanda June Hatton | | | |
| • | | Debtors | -, | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY UNLIQUIDATED CODEBTOR Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ONTINGENT SPUTED AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) Account No. 6089 Real Property Tax **Montgomery County** 0.00 105 Hwy 270 E STE 9 Mount Ida, AR 71957 2,660.22 2,660.22 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) Schedule of Creditors Holding Unsecured Priority Claims 2,660.22 2,660.22 Total 0.00 (Report on Summary of Schedules) 2,660.22 2,660.22

6:12-bk-70080 Doc#: 1 Filed: 01/10/12 Entered: 01/10/12 16:57:05 Page 20 of 55

B6F (Official Form 6F) (12/07)

| In re | Bobby Joe Hatton, Wanda June Hatton | | Case No. | |
|-------|--|---------|----------|--|
| _ | | Debtors | , | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| | | | · · · · · · · · · · · · · · · · · · · | | | _ | |
|--|-----------------|--------|---------------------------------------|-----------|-----------------------|-------------|-----------------|
| CREDITOR'S NAME, | C | Н | lusband, Wife, Joint, or Community | CON | U | P | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R |) N | CONSIDERATION FOR CLAIM. IF CLAIM | ONTINGENT | 1001 | U T E | AMOUNT OF CLAIM |
| Account No. x1MUN | | | Med1 02 St Joseph S Mercy Health | T N | D A T E D | | |
| Acnts Mgmt 1976 E Grand Hot Springs, AR 71902 | | F | 1 | | | | 463.00 |
| Account No. x1DJC | | | Med1 02 Hs Radiology Services | + | | | |
| Acnts Mgmt 1976 E Grand Hot Springs, AR 71902 | | F | 1 | | | | |
| Account No. x255R | _ | + | Med1 02 Hs Radiology Services | + | ┞ | | 106.00 |
| Acnts Mgmt 1976 E Grand Hot Springs, AR 71902 | | F | | | | | |
| | | | | | | | 10.00 |
| Account No. Ben M. Elrod 1008 Village Drive Arkadelphia, AR 71923 | | J | Judgment | | | | 153,805.63 |
| _4 continuation sheets attached | • | • | (Total of | Subt | | | 154,384.63 |

| In re | Bobby Joe Hatton, | Case No. | |
|-------|-------------------|----------|--|
| | Wanda June Hatton | | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | C | Ηι | sband, Wife, Joint, or Community | | Ç | U | D | |
|--|----------|-------------|--|-----------|------------|--------|--------------------------------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | ODE BTOR | C J M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLA IS SUBJECT TO SETOFF, SO STATE | IM | COXHLXGEXH | Z | $ \otimes$ P \cup P \cup D | AMOUNT OF CLAIM |
| Account No. xxxxxx2154 | | | Opened 6/01/11 Last Active 8/22/11 | | Т | T E | | |
| Berlin-wheeler,inc-mo Po Box 463 Jefferson City, MO 65102 | | J | CollectionAttorney Mmc Express Care Ce | entral | | D | | 92.00 |
| Account No. xxx3611 | | | 11/29/2003 | | | | | |
| EMPI 599 Cardigan Rd. St. Paul,, MN 55126 | | н | Medical | | | | | |
| | | | | | | | | 328.26 |
| Account No. xxxx2579 ER Solutions Po Box 9004 Renton, WA 98057 | | н | Opened 4/01/11 CollectionAttorney Ebay Inc. | | | | | 260.00 |
| Account No. | | | Foreclosure Deficiency | | | П | | |
| Eugene Parliment P.O. Box 433 Mount Ida, AR 71957 | | J | | | | | | 225,730.31 |
| Account No. xxxxxxxxxxxxx5929 | Г | | Opened 8/19/96 Last Active 1/09/07 | | | П | | |
| Fnb Hot Sprg P O Box 22090 Hot Springs, AR 71903 | | J | Credit Card | | | | | 100.00 |
| Sheet no. 1 of 4 sheets attached to Schedule of | | | | S | ubt | ota | l | 200 540 57 |
| Creditors Holding Unsecured Nonpriority Claims | | | (То | tal of th | is 1 | pag | e) | 226,510.57 |

| In re | Bobby Joe Hatton, | Case No. | |
|-------|-------------------|----------|--|
| _ | Wanda June Hatton | , | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | 1 | | shood Wife laint or Community | | 11 | Б | |
|--|----------|---------|---|-------------|---------|---------------------------------|-----------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | I N G | >2G2-D4 | $D - \emptyset P \cup H \cup D$ | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxx5921 | | | Opened 7/29/03 Last Active 10/19/11 | Т | DATED | | |
| Fnb Mena #1 Financial Ctr Highway 71 So Mena, AR 71953 | | J | CreditCard | | ט | | 1,909.00 |
| Account No. xxxxxxxxxxxx1810 | H | | Opened 8/01/07 Last Active 9/10/07 | H | | | |
| Fox Collection Center Po Box 528 Goodlettsville, TN 37070 | | н | CollectionAttorney Touchstone Imaging Of Hot Spg | | | | |
| | | | | | | | 286.00 |
| Account No. xxxxxxxxPEF1 Hanger Prosthetiest Orthotics West, In 3540 East Baseline Phoenix, AZ 85042-9628 | | J | 01/23/2011 Medical | | | | 242.00 |
| Account No. x5038 | | | 05/15/2011 | | | | |
| Hot Sprongs Bone & Joint Clinic Oone Mercy Lane Ste. 404 Hot Springs, AR 71913-6441 | | н | Medical | | | | 1,326.00 |
| Account No. | H | | Medical | H | | | |
| Little Rock Cardiology Clinic P.O. Box 667 Little Rock, AR 72203-0667 | | J | | | | | 70.00 |
| Sheet no. 2 of 4 sheets attached to Schedule of | _ | | S | ubte | ota | l | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of th | iis ţ | pag | e) | 3,833.00 |

| In re | Bobby Joe Hatton, | Case No |
|-------|-------------------|---------|
| | Wanda June Hatton | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | CO | | usband, Wife, Joint, or Community | CONT | U N L | D I | |
|--|----------|-------------|---|-----------------|-------------|--------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | N T I N G E N T | l a | P U T | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxx0871 | | | 04/01/1994 | Т | T E | | |
| Lowes P.O. Box 105982 dept 79 Alanta, GA 30353-5982 | | J | Store Card | | D | | 2,612.00 |
| Account No. xxxxxxxxxxxxx0871 | | | Opened 11/01/09 | | | | |
| Lvnv Funding Llc Po Box 740281 Houston, TX 77274 | | Н | FactoringCompanyAccount Ge Capital Lowe S Consumer | | | | |
| | | | | | | | 2,612.00 |
| Account No. xxxxx4712 | | | 09/30/2010 Medical | | | | |
| Mercy St. Joseph's Clinic P.O. Box 21850 Hot Springs, AR 71903 | | J | | | | | |
| | | | | | | | 92.00 |
| Account No. x6604 | | | 01/22/2011 | | | | |
| Midstate Anesthesia Services P.A. 3810 Central Avenue, Ste. H Hot Springs, AR 71913 | | н | Medical | | | | |
| | | | | | L | | 344.20 |
| Account No. | | | Collection | | | | |
| Pryor, Robertson, Beasley & Smith P.O. Box, Drawer 848 Fort Smith, AR 72902-0848 | | J | | | | | 688.00 |
| | | | | L | 上 | _ | 000.00 |
| Sheet no. 3 of 4 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | S (Total of tl | | tota pag | | 6,348.20 |
| | | | (101110111 | | | , - / | |

| In re | Bobby Joe Hatton, | Case No |
|-------|-------------------|---------|
| | Wanda June Hatton | |

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, | CO | Hu | sband, Wife, Joint, or Community | CON | U N L | P | 1 | |
|--|----------|-------------|---|------------|-------------|------------------|--------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | NT I NG EN | QU | P U T F | | AMOUNT OF CLAIM |
| Account No. | | | Medical | Ť | ΙT | | ſ | |
| ST. Joseph Mercy Hospital P.O. Box 504264 Saint Louis, MO 63150 | | J | | | D | | | 551.00 |
| Account No. | ┞ | | Insurance Claim | | | H | + | |
| The Hartford Group P.O. Box 958457 Lake Mary, FL 32795 | | J | | | | | | |
| | | | | | | | | 4,082.88 |
| Account No. xx1257 Touchstone Imaging of HOT Springs 3633 Central Ave. Ste. 100 Hot Springs, AR 71913 | | н | 04/11/2006 Medical | | | | | |
| | | | | | | | | 261.04 |
| Account No. xxxxxxxxxxxx5921 | | | Credit Card | | | | | |
| Visa Hwy 71 S #1 Financial center Mena, AR 71953 | | w | | | | | | |
| | | | | | | | | 2,010.54 |
| Account No. | | | | | | | | |
| Sheet no. <u>4</u> of <u>4</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | Sub | | | \int | 6,905.46 |
| creators froming onsecured frompriority Claims | | | (Report on Summary of So | Т | Γota | al | İ | 397,981.86 |

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B6G (Official Form 6G) (12/07)

| In re | Bobby Joe Hatton, | Case No. | |
|-------|-------------------|-----------|--|
| | Wanda June Hatton | | |
| - | | Debtors , | |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. 6:12-bk-70080 Doc#: 1 Filed: 01/10/12 Entered: 01/10/12 16:57:05 Page 26 of 55

B6H (Official Form 6H) (12/07)

| In re | Bobby Joe Hatton, | Case No. |
|-------|-------------------|----------|
| | Wanda June Hatton | |
| | | Debtors |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

Michael Hatton 2113 Highway 88 E Sims, AR 71969

Michael Hatton 2113 Highway 88 E Sims, AR 71969

NAME AND ADDRESS OF CREDITOR

First National Bank 221 S. George Street Mount Ida, AR 71957

Arkansas Development Finance Authority 423 Main Street, Ste. 500 Little Rock, AR 72203-8023

| 361 (Offi | cial Form 61) (12/07) |
|-----------|-------------------------|
| | Bobby Joe Hatton |
| In re | Wanda June Hatton |

| Case No. | |
|----------|--|
| | |

Debtor(s)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status: | DEPE | ENDENTS OF DEBTOR A | AND SPC | USE | | |
|---|--|------------------------|---------|------------------|-------------|---------------------------------------|
| Married | RELATIONSHIP(S): None. | | | | | |
| Employment: | DEBTOR | | | SPOUSE | | |
| Occupation | Retired | Machine | Techn | | | |
| Name of Employer | Retired | Self Em | ployed | | | |
| How long employed | 3 Years | 15 Years | | | | |
| Address of Employer | | | | | | |
| | or projected monthly income at time case file | | | DEBTOR | | SPOUSE |
| | and commissions (Prorate if not paid monthly | 7) | \$ | 0.00 | \$ | 0.00 |
| 2. Estimate monthly overtime | | | \$ | 0.00 | \$ | 0.00 |
| 3. SUBTOTAL | | | \$ | 0.00 | \$ | 0.00 |
| 4. LESS PAYROLL DEDUCTION | | | | | | |
| a. Payroll taxes and social s | security | | \$ | 0.00 | \$ | 0.00 |
| b. Insurance | | | \$ | 0.00 | \$ | 0.00 |
| c. Union dues | | | \$ | 0.00 | \$ | 0.00 |
| d. Other (Specify): | | | \$ | 0.00 | \$ | 0.00 |
| | | | \$ | 0.00 | \$ | 0.00 |
| 5. SUBTOTAL OF PAYROLL I | DEDUCTIONS | | \$ | 0.00 | \$ | 0.00 |
| 6. TOTAL NET MONTHLY TA | KE HOME PAY | | \$ | 0.00 | \$ | 0.00 |
| 7. Regular income from operation | n of business or profession or farm (Attach de | tailed statement) | \$ | 0.00 | \$ | 3,662.99 |
| 8. Income from real property | | | \$ | 0.00 | \$ | 0.00 |
| 9. Interest and dividends | | | \$ | 0.00 | \$ | 0.00 |
| dependents listed above | oport payments payable to the debtor for the d | ebtor's use or that of | \$ | 0.00 | \$ | 0.00 |
| 11. Social security or governmen | | | ¢. | 4 207 00 | ď | 0.00 |
| (Specify): Social Sec | urity | | \$ — | 1,307.00 0.00 | <u>\$</u> — | 0.00 |
| 12. Pension or retirement income | | | φ | 0.00 | \$ <u></u> | 0.00 |
| 13. Other monthly income | | | Ф | 0.00 | φ | 0.00 |
| (Specify): | | | • | 0.00 | \$ | 0.00 |
| (Specify). | | | \$ | 0.00 | \$ | 0.00 |
| 14. SUBTOTAL OF LINES 7 TI | HROUGH 13 | | \$ | 1,307.00 | \$ | 3,662.99 |
| | COME (Add amounts shown on lines 6 and 14 | 1) | \$ | 1,307.00 | \$ | 3,662.99 |
| 15.71 ERAIGE MONTHET INC | (and amounts shown on fines of and 1- | · <i>)</i> | Ψ — | | | · · · · · · · · · · · · · · · · · · · |
| 16. COMBINED AVERAGE MO | ONTHLY INCOME: (Combine column totals | from line 15) | | \$ | 4,969. | 99 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

| B6J | (Official | Form | 6J) (| 12/07) |
|-----|-----------|------|---------------|--------|
| | D. | ahhu | 100 | Hattar |

| In re | Bobby Joe Hatton Wanda June Hatton | | Case No. | |
|-------|------------------------------------|-----------|----------|--|
| | | Debtor(s) | | |

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from the deductions from income allowed on Form 22A or 22C.

| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complexpenditures labeled "Spouse." | ete a separa | e schedule of |
|--|----------------|---------------|
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ | 2,347.51 |
| a. Are real estate taxes included? Yes No _X | Ψ | |
| b. Is property insurance included? Yes No X | | |
| 2. Utilities: a. Electricity and heating fuel | \$ | 200.00 |
| b. Water and sewer | \$ | 28.00 |
| c. Telephone | \$ | 116.96 |
| d. Other Satellite | \$ | 27.00 |
| 3. Home maintenance (repairs and upkeep) | \$ | 100.00 |
| 4. Food | \$ | 470.00 |
| 5. Clothing | \$ | 50.00 |
| 6. Laundry and dry cleaning | \$ | 20.00 |
| 7. Medical and dental expenses | \$ | 35.00 |
| 8. Transportation (not including car payments) | \$ | 150.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$ | 0.00 |
| 10. Charitable contributions | \$ | 0.00 |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | | |
| a. Homeowner's or renter's | \$ | 0.00 |
| b. Life | \$ | 19.50 |
| c. Health | \$ | 0.00 |
| d. Auto | \$ | 69.58 |
| e. Other | \$ | 0.00 |
| 12. Taxes (not deducted from wages or included in home mortgage payments) | | |
| (Specify) Property Tax | \$ | 221.68 |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan) | | |
| a. Auto | \$ | 0.00 |
| b. Other | \$ | 0.00 |
| c. Other | \$ | 0.00 |
| 14. Alimony, maintenance, and support paid to others | \$ | 0.00 |
| 15. Payments for support of additional dependents not living at your home | \$ | 0.00 |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ | 1,092.79 |
| 17. Other Post Office Box Rent | \$ | 2.34 |
| Other Pet Care | \$ | 20.00 |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.) | \$ | 4,970.36 |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document: | | |
| 20. STATEMENT OF MONTHLY NET INCOME | _ | |
| a. Average monthly income from Line 15 of Schedule I | \$ | 4,969.99 |
| b. Average monthly expenses from Line 18 above | \$ | 4,970.36 |
| c. Monthly net income (a. minus b.) | \$ | -0.37 |

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B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Western District of Arkansas

| In re | Bobby Joe Hatton Wanda June Hatton | | Case No. | |
|-------|---------------------------------------|----------------------|--------------|------|
| | | Debtor(s) | Chapter | 7 |
| | | | | |
| | | | | |
| | DECLARATION CONC | ERNING DEBTOR'S | S SCHEDUL | ES |
| | | | | |
| | DECLARATION UNDER PENAI | LTY OF PERJURY BY IN | DIVIDUAL DEI | BTOR |
| | | | | |

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____21__sheets, and that they are true and correct to the best of my knowledge, information, and belief.

| Date | January 10, 2012 | Signature | /s/ Bobby Joe Hatton |
|------|------------------|-----------|-----------------------|
| | | | Bobby Joe Hatton |
| | | | Debtor |
| Date | January 10, 2012 | Signature | /s/ Wanda June Hatton |
| | | _ | Wanda June Hatton |
| | | | Joint Debtor |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (04/10)

United States Bankruptcy Court Western District of Arkansas

| In re | Bobby Joe Hatton Wanda June Hatton | | Case No. | |
|-------|---------------------------------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

${\bf 2. \ Income\ other\ than\ from\ employment\ or\ operation\ of\ business}$

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|-------------|---|
| \$23,445.25 | 2011 Husband - Work on various cattle farms |
| \$26,587.09 | 2010 Husband - Work on various cattle farms |
| \$10,479.40 | 2009 Husband - Work on various cattle farms |

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

2

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,850*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

CAPTION OF SUIT

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AND CASE NUMBER Eugene Parliment v. Bobby Hatton, et ux and et al

NATURE OF PROCEEDING Foreclosure COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

Circuit Court of Montgomery County, Arkansas

Judgment Entered

Diamond Bank v. Eugene Parliment

Diamond Bank v. Bobby & Wanda Hatton, United States of America, Department of Treasury - Internal Revenue Service, Case No. CV-2009-073

Ben M. Elrod v. HMC, Inc., Bob Hatton & Wanda Hatton, Case No. CV 2005-159

Debt Collection

Circuit Court of Clark County, Arkansas

Judgment Entered

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

BENEFIT PROPERTY WAS SEIZED

^{*} Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

5. Repossessions, foreclosures and returns

None П

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF REPOSSESSION. DESCRIPTION AND VALUE OF NAME AND ADDRESS OF FORECLOSURE SALE, CREDITOR OR SELLER **PROPERTY** TRANSFER OR RETURN

Diamond Bank 07/15/2011

P.O. Box 10

Glenwood, AR 71943

Diamond Bank

P.O. Box 10

Glenwood, AR 71943

Diamond Bank

P.O. Box 10 Glenwood, AR 71943 07/15/2011

07/15/2011

HAAS VF-0E Milling Machine, Leadwell LTC-20 APCNC lathe, Leadwell MV760 Milling Machine 3

Value: 1000.00

Value: 285000

Value: 900

1992 Datsun Forklift

Pasture land Hwy 27 North

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE

ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION NAME AND ADDRESS DESCRIPTION AND VALUE OF DATE OF OF COURT OF CUSTODIAN **PROPERTY** ORDER CASE TITLE & NUMBER

7. Gifts

None

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF RELATIONSHIP TO DESCRIPTION AND DATE OF GIFT PERSON OR ORGANIZATION DEBTOR, IF ANY VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Honey Law Firm, P. A. PO Box 1254 Hot Springs, AR 71902 DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR 12/19/11 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$301 Filing Fees, \$50 Credit Report, \$25 Credit Counseling, \$8 Online Questionnaire, \$50 Copy Fee, \$15 Debtor's Education, \$4,051 Attorney's Fees for Bankruptcy Case, \$5,500 Attorney's Fees for Representation of HMC Corporation/Tax Case.

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR Altech Machine Shop P.O. Box 137073 Arkadelphia, AR 71923

DATE **2009**

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED
Two LB15 Okuma Lathes valued at
\$11,500.00-Proceeds applied to loan for this
equipment.

None

Consumer

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

5

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

ENVIRONMENTAL LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

GOVERNMENTAL CIVIT

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF

GOVERNMENTAL UNIT DOCKET NUMBER STATUS OR DISPOSITION

18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

NAME (ITIN)/ COMPLETE EIN ADDRESS NATURE OF BUSINESS ENDING DATES

HMC, Inc. 71-0711155 69 Industry Drive Machine Shop 01/01/1990 to

Mount Ida, AR 71957

P.O. Box 971

Mount Ida, AR 71957

Machine Shop

04/18/2010 - Present

BEGINNING AND

3/31/2009

6

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

Vortex Manufacturing 3793

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DATE OF INVENTORY INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

controls, of holds 5 percent of more of the voting of equity securities of the corporation.

NAME AND ADDRESS
TITLE
NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22 . Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23 . Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS
OF RECIPIENT,
RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 7

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

8

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | January 10, 2012 | Signature | /s/ Bobby Joe Hatton |
|------|------------------|-----------|-----------------------|
| | | _ | Bobby Joe Hatton |
| | | | Debtor |
| Date | January 10, 2012 | Signature | /s/ Wanda June Hatton |
| | <u>.</u> | - | Wanda June Hatton |
| | | | Joint Debtor |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

United States Bankruptcy Court Western District of Arkansas

| | | western Distr | ict of Arkansas | | |
|------------|--|--------------------------|--------------------------------------|---------------------|-----------------------------------|
| In re | Bobby Joe Hatton | | | Case No. | |
| mie | Wanda June Hatton | I | Debtor(s) | _ Case No. Chapter | 7 |
| | | | (,) | 1 | |
| | CHAPTER 7 INI | DIVIDUAL DEBTO | R'S STATEMEN | T OF INTEN | NTION |
| D / D/F | | | | 10 510 | ** |
| PART | A - Debts secured by property of property of the estate. Attach ac | | | eted for EAC | H debt which is secured by |
| | property of the estate. Attach ac | iditional pages if nec | essary.) | | |
| Proper | ty No. 1 | | | | |
| Cmodi | tor's Name: | | Dagawiha Buanautz | Coouring Dob | 4. |
| | ond Bank | | Describe Property 11.5 Acres located | | |
| <u> </u> | | | | | |
| - | ty will be (check one): | ■ Datained | | | |
| | Surrendered | Retained | | | |
| | ning the property, I intend to (check a | at least one): | | | |
| | Redeem the property | | | | |
| | Reaffirm the debt Other. Explain | (for axampla axa | oid lien using 11 U.S. | C & 522(f)) | |
| | Other. Explain | (for example, ave | nd hen using 11 O.S. | .c. § 322(1)). | |
| - | ty is (check one): | | _ | | |
| | Claimed as Exempt | | ■ Not claimed as e | xempt | |
| Proper | ty No. 2 | | | | |
| | | | | | |
| | tor's Name: Credit Services | | Describe Property | | t: s located at 773 West Bend |
| i ai iii v | orealt dervices | | Sims, AR 71969 | and 140.7 acre | s located at 115 West Bellu |
| D | 4:11 b - (-bb) | | | | |
| - | ty will be (check one): Surrendered | ■ Retained | | | |
| _ | Surrendered | - Retained | | | |
| | ining the property, I intend to (check a | at least one): | | | |
| | Redeem the property Reaffirm the debt | | | | |
| | Other. Explain | (for example, avo | oid lien using 11 U.S. | C 8 522(f)) | |
| | | (for example, ave | are nen using 11 0.5 | 3 322(1)). | |
| | ty is (check one): | | = | | |
| | Claimed as Exempt | | ■ Not claimed as e | xempt | |
| PART | B - Personal property subject to unex | pired leases. (All three | columns of Part B n | nust be complete | ed for each unexpired lease. |
| | additional pages if necessary.) | r | | Ι | |
| | | 1 | | | |
| Proper | ty No. 1 | | | | |
| Lesson | r's Name: | Describe Leased Pro | perty: | Lease will be | e Assumed pursuant to 11 |
| -NONE | | | - • | U.S.C. § 365 | 5(p)(2): |
| | | | | ☐ YES | □ NO |

B8 (Form 8) (12/08) Page 2

I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.

| Date | January 10, 2012 | Signature | /s/ Bobby Joe Hatton |
|------|------------------|-----------|-----------------------|
| | - | _ | Bobby Joe Hatton |
| | | | Debtor |
| Date | January 10, 2012 | Signature | /s/ Wanda June Hatton |
| | | | Wanda June Hatton |
| | | | Joint Debtor |

United States Bankruptcy Court Western District of Arkansas

| In | re | Bobby Joe Hatton Wanda June Hatton | | | Case No. | |
|------|----------|--|---|---|--|---|
| | • | | | Debtor(s) | Chapter | 7 |
| | | DISCLOS | SURE OF COMP | ENSATION OF ATTO | RNEY FOR D | EBTOR(S) |
| 1. | con | npensation paid to me wit | hin one year before the f | Rule 2016(b), I certify that I filing of the petition in bankrupton of or in connection with the ba | cy, or agreed to be pa | the above-named debtor and that id to me, for services rendered or to bllows: |
| | | For legal services, I have | e agreed to accept | | \$ | 4,051.00 |
| | | | | ed | | 4,051.00 |
| | | Balance Due | | | \$ | 0.00 |
| 2. | The | e source of the compensati | on paid to me was: | | | |
| | | ■ Debtor □ C | Other (specify): | | | |
| 3. | The | e source of compensation | to be paid to me is: | | | |
| | | ■ Debtor □ C | Other (specify): | | | |
| 4. | | I have not agreed to share | e the above-disclosed cor | mpensation with any other person | n unless they are men | nbers and associates of my law firm. |
| | | | | nsation with a person or persons names of the people sharing in th | | s or associates of my law firm. A ached. |
| 5. | In | return for the above-discle | osed fee, I have agreed to | render legal service for all aspec | cts of the bankruptcy | case, including: |
| | b. c. | Preparation and filing of a Representation of the deb [Other provisions as need Negotiations with reaffirmation agr | any petition, schedules, s tor at the meeting of cred ed] n secured creditors to | ndering advice to the debtor in de tatement of affairs and plan whic litors and confirmation hearing, a or reduce to market value; ex tions as needed; preparatio household goods. | th may be required; and any adjourned he cemption planning | arings thereof; |
| 6. | Ву | | of the debtors in any | fee does not include the following dischargeability actions, jud | | ces, relief from stay actions or |
| | | | | CERTIFICATION | | |
| this | | ertify that the foregoing is kruptcy proceeding. | a complete statement of | any agreement or arrangement fo | r payment to me for r | epresentation of the debtor(s) in |
| Dat | ed: | January 10, 2012 | | /s/ Marc Honey | | |
| | | | | Marc Honey 860 Honey Law Firm PO Box 1254 Hot Springs, AR | , P. A. 71902 | - |
| | | | | (501) 321-1007 | Fax: (501) 321-125 | 00 |

UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF ARKANSAS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Form B 201A, Notice to Consumer Debtor(s)

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1000 filing fee, \$46 administrative fee: Total fee \$1046)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

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B 201B (Form 201B) (12/09)

United States Bankruptcy Court Western District of Arkansas

| In re | Bobby Joe Hatton Wanda June Hatton | | Case No. | | |
|-------|---------------------------------------|-----------|----------|--------------|--|
| | | Debtor(s) | Chapter | 7 | |
| | CEDEVIL CA EVOL | | ED DEDEO | D (a) | |

CERTIFICATION OF NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

Certification of Debtor

I (We), the debtor(s), affirm that I (we) have received and read the attached notice, as required by § 342(b) of the Bankruptcy Code.

| Bobby Joe Hatton Wanda June Hatton | X | /s/ Bobby Joe Hatton | January 10, 2012 |
|---------------------------------------|---|------------------------------------|------------------|
| Printed Name(s) of Debtor(s) | | Signature of Debtor | Date |
| Case No. (if known) | X | /s/ Wanda June Hatton | January 10, 2012 |
| | | Signature of Joint Debtor (if any) | Date |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Western District of Arkansas

| In re | Bobby Joe Hatton Wanda June Hatton | | Case No. | |
|--------|---------------------------------------|---|----------|---------------------|
| | | Debtor(s) | Chapter | 7 |
| Γhe ab | | TELEGITION OF CREDITOR | | of their knowledge. |
| Date: | | | | |
| Date: | January 10, 2012 | /s/ Bobby Joe Hatton | | |
| | January 10, 2012 | /s/ Bobby Joe Hatton Bobby Joe Hatton | | |
| | January 10, 2012 | | | |
| Date: | | Bobby Joe Hatton | | |
| Date: | | Bobby Joe Hatton Signature of Debtor | | |

Acnts Mgmt 1976 E Grand Hot Springs, AR 71902

Ben M. Elrod 1008 Village Drive Arkadelphia, AR 71923

Berlin-wheeler, inc-mo Po Box 463 Jefferson City, MO 65102

Claims Resource Services 170 Knowles Drive, Ste. 2 Los Gatos, CA 95032-1833

Diamond Bank P.O. Box 10 Glenwood, AR 71943

EMPI 599 Cardigan Rd. St. Paul,, MN 55126

ER Solutions Po Box 9004 Renton, WA 98057

ER Solutions 800 Sw 39th St Renton, WA 98057

Eugene Parliment P.O. Box 433 Mount Ida, AR 71957

Farm Credit Services P.O. Box 1719 Russellville, AR 72811

Fnb Hot Sprg P O Box 22090 Hot Springs, AR 71903 Fnb Mena #1 Financial Ctr Highway 71 So Mena, AR 71953

Fox Collection Center Po Box 528 Goodlettsville, TN 37070

Fox Collection Center 456 Moss Trl Goodlettsville, TN 37072

Hanger Prosthetiest Orthotics West, In 3540 East Baseline Phoenix, AZ 85042-9628

Hot Sprongs Bone & Joint Clinic Oone Mercy Lane Ste. 404 Hot Springs, AR 71913-6441

Little Rock Cardiology Clinic P.O. Box 667 Little Rock, AR 72203-0667

Lowes
P.O. Box 105982 dept 79
Alanta, GA 30353-5982

Lvnv Funding Llc Po Box 740281 Houston, TX 77274

Mercy St. Joseph's Clinic P.O. Box 21850 Hot Springs, AR 71903

Michael Hatton 2113 Highway 88 E Sims, AR 71969

Midstate Anesthesia Services P.A. 3810 Central Avenue, Ste. H Hot Springs, AR 71913

Montgomery County 105 Hwy 270 E STE 9 Mount Ida, AR 71957

Pryor, Robertson, Beasley & Smith P.O. Box, Drawer 848 Fort Smith, AR 72902-0848

ST. Joseph Mercy Hospital P.O. Box 504264 Saint Louis, MO 63150

The Hartford Group P.O. Box 958457 Lake Mary, FL 32795

Touchstone Imaging of HOT Springs 3633 Central Ave. Ste. 100 Hot Springs, AR 71913

Valarity, LLC P.O. Box 505023 Saint Louis, MO 63150-5023

Visa Hwy 71 S #1 Financial center Mena, AR 71953

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B22A (Official Form 22A) (Chapter 7) (12/10)

| In re | Bobby Joe Hatton Wanda June Hatton | According to the information required to be entered on this statement | |
|-------------------------|---------------------------------------|---|--|
| | Debtor(s) | (check one box as directed in Part I, III, or VI of this statement): | |
| Case Number: (If known) | | ☐ The presumption arises. | |
| | | ■ The presumption does not arise. | |
| | | ☐ The presumption is temporarily inapplicable. | |

CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

| | Part I. MILITARY AND NON-CONSUMER DEBTORS | | | | | |
|-----|--|--|--|--|--|--|
| 1A | Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. | | | | | |
| 171 | □ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)). | | | | | |
| 1B | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement. | | | | | |
| | ☐ Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts. | | | | | |
| | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Arme Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. | | | | | |
| 1C | □ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard | | | | | |
| | a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/ □ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed; | | | | | |
| | OR | | | | | |
| | b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/ ☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed. | | | | | |

| | Part II. CALCULATION OF N | 1Ol | NTHLY INC | CON | ME FOR § 707(t |)(7) | EXCLUSION | | |
|----|--|---------------|-------------------|-------|--------------------------|----------|--------------------|-----|--------------------|
| | Marital/filing status. Check the box that applies | and o | complete the bal | lance | e of this part of this s | tateme | ent as directed. | | |
| | a. \square Unmarried. Complete only Column A ("L | Debt o | or's Income'') f | or L | ines 3-11. | | | | |
| | b. \square Married, not filing jointly, with declaration | | | | | | | | |
| 2 | "My spouse and I are legally separated under | | | | | | | | |
| 2 | purpose of evading the requirements of § 70' for Lines 3-11. | /(b)(| 2)(A) of the Bai | ıkru | ptcy Code." Comple | e only | column A ("Del | oto | r's Income'') |
| | c. \square Married, not filing jointly, without the decl | larati | on of separate h | O1156 | eholds set out in Line | 2 h al | oove Complete b | oth | Column A |
| | ("Debtor's Income") and Column B ("Spo | | | | | 2.0 a | bove. Complete a | oun | Column 21 |
| | d. Married, filing jointly. Complete both Col | | | | | (''Sp | ouse's Income'') | for | Lines 3-11. |
| | All figures must reflect average monthly income r | | | | | | Column A | | Column B |
| | calendar months prior to filing the bankruptcy cas | | | | | | | | |
| | the filing. If the amount of monthly income varie | | | ths, | you must divide the | | Debtor's Income | | Spouse's Income |
| | six-month total by six, and enter the result on the | appro | opriate line. | | | | Hicome | | Income |
| 3 | Gross wages, salary, tips, bonuses, overtime, co | mmi | ssions. | | | \$ | 0.00 | \$ | 0.00 |
| | Income from the operation of a business, profes | | | | | ıd | | | |
| | enter the difference in the appropriate column(s) of | | | | | | | | |
| | business, profession or farm, enter aggregate num not enter a number less than zero. Do not include | | | | | | | | |
| 4 | Line b as a deduction in Part V. | c uniy | part of the bu | JIIIC | 35 expenses entereu | | | | |
| | | | Debtor | | Spouse | | | | |
| | a. Gross receipts | \$ | 1,970. | 61 | \$ 0.0 | | | | |
| | b. Ordinary and necessary business expenses | \$ | 1,092. | | | | | | |
| | c. Business income | _ | btract Line b fro | | | \$ | 877.82 | \$ | 0.00 |
| | Rents and other real property income. Subtract | | | | | | | | |
| | the appropriate column(s) of Line 5. Do not enter | | | | | 7 | | | |
| 5 | part of the operating expenses entered on Line b as a deduction in Part V. Debtor Spouse | | | | | \neg | | | |
| 5 | a. Gross receipts | \$ | | .00 | | 00 | | | |
| | b. Ordinary and necessary operating expenses | _ | | .00 | | | | | |
| | c. Rent and other real property income | | btract Line b fro | om I | Line a | \$ | 0.00 | \$ | 0.00 |
| 6 | Interest, dividends, and royalties. | | | | | \$ | 0.00 | \$ | 0.00 |
| 7 | Pension and retirement income. | | | | | \$ | 0.00 | \$ | 0.00 |
| | Any amounts paid by another person or entity, | on a | regular basis. | for 1 | the household | | | | |
| | expenses of the debtor or the debtor's dependen | | | | | | | | |
| 8 | purpose. Do not include alimony or separate maintenance payments or amounts paid by your | | | | | | | | |
| | spouse if Column B is completed. Each regular p | | | | | n; \$ | 0.00 | ¢ | 0.00 |
| | if a payment is listed in Column A, do not report | | • | | | φ | 0.00 | φ | 0.00 |
| | Unemployment compensation. Enter the amount However, if you contend that unemployment com | | | | | a | | | |
| | benefit under the Social Security Act, do not list t | | | | | | | | |
| 9 | or B, but instead state the amount in the space bel | ow: | | _ | | | | | |
| | Unemployment compensation claimed to | | | | | | | | |
| | be a benefit under the Social Security Act Debte | or\$ | 0.00 | Spo | ouse \$ 0.0 | 00 \$ | 0.00 | \$ | 0.00 |
| | Income from all other sources. Specify source at | | | | | | | | |
| | on a separate page. Do not include alimony or se | | | | | • | | | |
| | spouse if Column B is completed, but include al maintenance. Do not include any benefits receive | | | | | | | | |
| | received as a victim of a war crime, crime against | | | | | | | | |
| 10 | domestic terrorism. | | , , | | | | | | |
| | | | Debtor | | Spouse | | | | |
| | a. | \$ | | | \$ | _ | | | |
| | b. | \$ | | | \$ | | | | |
| | Total and enter on Line 10 | | | | | \$ | 0.00 | \$ | 0.00 |
| 11 | Subtotal of Current Monthly Income for § 707 | | | | | , if | 077.66 | φ. | 0.00 |
| | Column B is completed, add Lines 3 through 10 i | n Co | Iumn B. Enter i | the t | otal(s). | \$ | 877.82 | Ф | 0.00 |

3

| 12 | Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A. | | 877.82 |
|----|---|---------|------------------|
| | Part III. APPLICATION OF § 707(b)(7) EXCLUSION | | |
| 13 | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result. | \$ | 10,533.84 |
| 14 | Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) | | |
| | a. Enter debtor's state of residence: AR b. Enter debtor's household size: 2 | \$ | 44,048.00 |
| | Application of Section 707(b)(7). Check the applicable box and proceed as directed. | | |
| 15 | ■ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. | does no | ot arise" at the |
| | ☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement | | |

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

| | Complete 1 are | 517, 7, 71, and 711 | or tins | statement only if required. | (Bee Ellie 13.) | | |
|--|---|-----------------------|----------|--|-----------------|----|--|
| | Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2) | | | | | | |
| 16 | 16 Enter the amount from Line 12. | | | | | | |
| 17 | Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero. S | | | | | | |
| | c. | | | \$ | | | |
| | d. | | | \$ | | Φ. | |
| - | Total and enter on Line 17 | | | | | \$ | |
| 18 | Current monthly income for § 70' | 7(b)(2). Subtract Lin | e 17 fro | m Line 16 and enter the resu | ılt. | \$ | |
| | Part V. C. | ALCULATION | OF DI | EDUCTIONS FROM | INCOME | | |
| | Subpart A: Dec | luctions under Sta | andard | s of the Internal Revenu | e Service (IRS) | | |
| 19A | National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | | | | | \$ | |
| 19B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tay return, plus the number of any additional dependents whom | | | | | | |
| | Persons under 65 year | rs of age | -0 | Persons 65 years of age | or older | | |
| | a1. Allowance per person b1. Number of persons | | a2. | Allowance per person Number of persons | | | |
| | c1. Subtotal | | c2. | Subtotal | | \$ | |
| Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court). The applicable family size consists of the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. | | | | | \$ | | |

| 20B | Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your coun available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of the number that would currently be allowed as exemptions on your fed any additional dependents whom you support); enter on Line b the tot debts secured by your home, as stated in Line 42; subtract Line b from not enter an amount less than zero. | | |
|-----|--|---|----|
| | a. IRS Housing and Utilities Standards; mortgage/rental expenseb. Average Monthly Payment for any debts secured by your | \$ | |
| | home, if any, as stated in Line 42 c. Net mortgage/rental expense | \$ Subtract Line b from Line a. | \$ |
| 21 | Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below: | \$ | |
| | Local Standards: transportation; vehicle operation/public transport | rtation expense. | |
| | You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation. | f whether you pay the expenses of operating a | |
| 22A | Check the number of vehicles for which you pay the operating expension included as a contribution to your household expenses in Line 8. | es or for which the operating expenses are | |
| | □ 0 □ 1 □ 2 or more. | | |
| | If you checked 0, enter on Line 22A the "Public Transportation" amou Transportation. If you checked 1 or 2 or more, enter on Line 22A the | 'Operating Costs" amount from IRS Local | |
| | Standards: Transportation for the applicable number of vehicles in the Census Region. (These amounts are available at www.usdoj.gov/ust/ of the control of t | \$ | |
| 22B | Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that you public transportation expenses, enter on Line 22B the "Public Tra Standards: Transportation. (This amount is available at www.usdoj.go court.) | \$ | |
| | Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owners vehicles.) | | |
| | □ 1 □ 2 or more. | | |
| 23 | Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 1, as stated in Line the result in Line 23. Do not enter an amount less than zero. | | |
| | a. IRS Transportation Standards, Ownership Costs | \$ | |
| | Average Monthly Payment for any debts secured by Vehicle b. 1, as stated in Line 42 | \$ | |
| | c. Net ownership/lease expense for Vehicle 1 | Subtract Line b from Line a. | \$ |
| 24 | Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23. Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Line the result in Line 24. Do not enter an amount less than zero. | | |
| | a. IRS Transportation Standards, Ownership Costs | \$ | |
| | Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42 | \$ | |
| | c. Net ownership/lease expense for Vehicle 2 | Subtract Line b from Line a. | \$ |
| 25 | Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social | | |
| | security taxes, and Medicare taxes. Do not include real estate or sale | | \$ |

| 26 | Other Necessary Expenses: involuntary deductions for employment. Enter the total average deductions that are required for your employment, such as retirement contributions, union dues, Do not include discretionary amounts, such as voluntary 401(k) contributions. | | |
|----|---|----------------------|----------|
| 27 | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you act life insurance for yourself. Do not include premiums for insurance on your dependents, for any other form of insurance. | | 1 |
| 28 | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you pay pursuant to the order of a court or administrative agency, such as spousal or child support painclude payments on past due obligations included in Line 44. | | |
| 29 | Other Necessary Expenses: education for employment or for a physically or mentally challe the total average monthly amount that you actually expend for education that is a condition of education that is required for a physically or mentally challenged dependent child for whom no providing similar services is available. | mployment and for | |
| 30 | Other Necessary Expenses: childcare. Enter the total average monthly amount that you actual childcare - such as baby-sitting, day care, nursery and preschool. Do not include other education | | 1 |
| 31 | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on | | |
| 32 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amo actually pay for telecommunication services other than your basic home telephone and cell phor pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary welfare or that of your dependents. Do not include any amount previously deducted. | ne service - such as | 1 |
| 33 | Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32. | \$ | 1 |
| | Note: Do not include any expenses that you have listed in L Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the mo the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, dependents. | nthly expenses in | |
| 34 | a. Health Insurance \$ | | |
| | b. Disability Insurance \$ | | |
| | c. Health Savings Account \$ | \$ | ; |
| | Total and enter on Line 34. If you do not actually expend this total amount, state your actual total average monthly expendelow: \$ | ditures in the space | |
| 35 | Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. | | . |
| 36 | Protection against family violence. Enter the total average reasonably necessary monthly experactually incurred to maintain the safety of your family under the Family Violence Prevention another applicable federal law. The nature of these expenses is required to be kept confidential by | d Services Act or | |
| 37 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specific Standards for Housing and Utilities, that you actually expend for home energy costs. You must trustee with documentation of your actual expenses, and you must demonstrate that the additional is reasonable and necessary. | provide your case | |
| 38 | Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$147.92* per child, for attendance at a private or public elementary or secondary | | |

 $^{^{*}}$ Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

| 39 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. | | | | \$ | | |
|----|--|--|---|-------|---------------------------|--|----|
| 40 | Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2). | | | | \$ | | |
| 41 | Total | Additional Expense Deducti | ons under § 707(b). Enter the total of | Lines | 34 through 40 | | \$ |
| | | | Subpart C: Deductions for D | ebt I | Payment | | |
| 42 | Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42. | | | | | | |
| | | Name of Creditor | Property Securing the Debt | Α | verage Monthly Payment | Does payment include taxes or insurance? | |
| | a. | | | \$ | | □yes □no | |
| | | | | | Γotal: Add Lines | | \$ |
| 43 | Other payments on secured claims. If any of debts listed in Line 42 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 42, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. Name of Creditor | | | \$ | | | |
| 44 | priori | ity tax, child support and alimo | claims. Enter the total amount, divided only claims, for which you were liable at ach as those set out in Line 28. | | | | \$ |
| | Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. | | | | | | |
| 45 | a. b. | issued by the Executive Off information is available at y the bankruptcy court.) | Chapter 13 plan payment. district as determined under schedules fice for United States Trustees. (This www.usdoj.gov/ust/ or from the clerk of ative expense of Chapter 13 case | X | tal: Multiply Line | es a and b | \$ |
| 46 | Total | Deductions for Debt Payme | nt. Enter the total of Lines 42 through 4 | 5. | | | \$ |
| | | | Subpart D: Total Deductions | fron | 1 Income | | |
| 47 | Total | of all deductions allowed un | der § 707(b)(2). Enter the total of Line | s 33, | 41, and 46. | | \$ |
| | | Part VI. I | DETERMINATION OF § 707(| b)(2 |) PRESUMP | ΓΙΟΝ | |
| 48 | Enter the amount from Line 18 (Current monthly income for § 707(b)(2)) | | | | \$ | | |
| 49 | Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2)) | | | | \$ | | |
| 50 | Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result. | | | | \$ | | |
| 51 | 60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result. | | | \$ | | | |

| | Initial presumption determination. Check the applicable box and proceed as directed. | | | | |
|---|--|-----------------------|--|--|--|
| 52 | ☐ The amount on Line 51 is less than \$7,025*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. | | | | |
| | ☐ The amount set forth on Line 51 is more than \$11,725* Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. | | | | |
| | \square The amount on Line 51 is at least \$7,025*, but not more than \$11,725*. Complete the remainder of Part VI (| Lines 53 through 55). | | | |
| 53 | Enter the amount of your total non-priority unsecured debt | \$ | | | |
| 54 | Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result. | \$ | | | |
| | Secondary presumption determination. Check the applicable box and proceed as directed. | | | | |
| 55 | ☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. | | | | |
| | ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. | | | | |
| | Part VII. ADDITIONAL EXPENSE CLAIMS | | | | |
| 56 | Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses. | | | | |
| | Expense Description Monthly Amou | ınt | | | |
| | a. \$ | | | | |
| | b. \$ | | | | |
| | c. \$ | _ | | | |
| | d. \$ Total: Add Lines a, b, c, and d \$ | _ | | | |
| Total: Add Lines a, b, c, and d \$ Part VIII. VERIFICATION | | | | | |
| | | | | | |
| | I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joi must sign.) Date: January 10, 2012 Signature: //s/Bobby Joe Hatton | nt case, both aebtors | | | |
| 57 | Bobby Joe Hatton (Debtor) | | | | |
| | Date: January 10, 2012 Signature /s/ Wanda June Hatton Wanda June Hatton (Joint Debtor, if a | uny) | | | |

^{*} Amounts are subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 07/01/2011 to 12/31/2011.

Line 4 - Income from operation of a business, profession, or farm

Source of Income: Vortex Manufacturing

Income/Expense/Net by Month:

| | Date | Income | Expense | Net |
|---------------|--------------------|------------|-----------------------------|----------|
| 6 Months Ago: | 07/2011 | \$1,970.61 | \$1,092.79 | \$877.82 |
| 5 Months Ago: | 08/2011 | \$1,970.61 | \$1,092.79 | \$877.82 |
| 4 Months Ago: | 09/2011 | \$1,970.61 | \$1,092.79 | \$877.82 |
| 3 Months Ago: | 10/2011 | \$1,970.61 | \$1,092.79 | \$877.82 |
| 2 Months Ago: | 11/2011 | \$1,970.61 | \$1,092.79 | \$877.82 |
| Last Month: | 12/2011 | \$1,970.61 | \$1,092.79 | \$877.82 |
| _ | Average per month: | \$1,970.61 | \$1,092.79 | |
| | | | Average Monthly NET Income: | \$877.82 |

Non-CMI - Social Security Act Income

Source of Income: Social Security

Income by Month:

| 6 Months Ago: | 07/2011 | \$1,307.00 |
|---------------|--------------------|------------|
| 5 Months Ago: | 08/2011 | \$1,307.00 |
| 4 Months Ago: | 09/2011 | \$1,307.00 |
| 3 Months Ago: | 10/2011 | \$1,307.00 |
| 2 Months Ago: | 11/2011 | \$1,307.00 |
| Last Month: | 12/2011 | \$1,307.00 |
| | Average per month: | \$1,307.00 |